PTO/SB/06 (08-03)

Approved for use through 7/31/2006. OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. PATENT APPLICATION FEE DETERMINATION RECORD Application or Docket Number Substitute for Form PTO-875 O. 601A36 CLAIMS AS FILED - PART I OTHER THAN (Column 1) OR SMALL ENTITY (Column 2) SMALL ENTITY FOR NUMBER FILED NUMBER EXTRA RATE FEE RATE FEE BASIC FEE (37 CFR 1.16(a)) OR TOTAL CLAIMS (37 CFR 1.16(c)) minus 20 = OR INDEPENDENT CLAIMS (37 CFR 1.16(b)) minus 3 = X S OR X \$ MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) OR * If the difference in column 1 is less than zero, enter "0" in column 2. TOTAL OR TOTAL CLAIMS AS AMENDED - PART II OTHER THAN (Column 1) (Column 2) OR (Column 3) SMALL ENTITY SMALL ENTITY CLAIMS HIGHEST REMAINING PRESENT NUMBER RATE ADDI-RATE **AFTER** PREVIOUSLY **EXTRA** TIONAL/ TIONAL AMENDMENT PAID FOR ENDME FEE FEE 92 Minus X S OR Minus X \$ OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(1)) OR + \$ TOTAL TOTAL ADD'L FEE OR ADD'L FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST 0 REMAINING PRESENT NUMBER RATE ADDI-RATE ADDI-ENT **AFTER** PREVIOUSLY PAID FOR **EXTRA** TIONAL TIONAL MENDMENT FEE FEE ENDME Total Minus (37 CFR 1.16(c)) X S OR Independent (37 CFR 1.16(b)) Minus OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL ADD'L FEE OR ADD'L FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST ပ REMAINING PRESENT NUMBER RATE ADDI-RATE ADDI-ENT **AFTER PREVIOUSLY EXTRA** TIONAL TIONAL AMENDMENT PAID FOR FEE FEE Total (37 CFR 1.16(c)) ENDMI Minus X \$ OR Independent (37 CFR 1.16(b)) Minus OR X \$ FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL ADD'L FEE OR ADD'L FEE If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

			Application or Docket Number												
PATENT APPLICATION FEE DETERMINATION RECO									0/601436						
Effective January 1, 2003										-S0087.000)					
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OR	OTHER SMALL			
TOTAL CLAIMS			Ja .				[RATE		FEE		RATE	FEE		
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE 375.00		375.00	OR	BASIC FEE	750.00		
TOTAL CHARGEABLE CLAIMS			22 minus 20=		*			X\$ 9= \Q		1q	OR	X\$18=			
INDEPENDENT CLAIMS			5 minus 3 =		*			X42= XV		RY	OR	X84=			
MULTIPLE DEPENDENT CLAIM PRESENT								+140	=	0 (OR	+280=	•		
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTA	L L		OR	TOTAL			
CLAIMS AS AMENDED - PART II												OTHER	THAN		
		(Column 1)	(Column 2) (Column 3)				SMALL ENTITY			OR	SMALL E	ENTITY			
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	=	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	•	Minus	**		=		X\$ 9:	=		OR	X\$18=			
	Independent	*	Minus	***		<u> </u>		X42=	= .		OR	X84=			
Ĺ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140	=		OR	+280=			
									AL EE		OR	TOTAL ADDIT. FEE	-		
	(Column 1) (Column 2) (Column 3)										•	ADDII. FEE			
AMENDMENT B	CLAIMS REMAINING		HIGH NUM				1		ADDI-				ADDI-		
		AFTER AMENDMENT		PREVIO	OUSLY	EXTRA		RATE	=	TIONAL FEE		RATE	TIONAL FEE		
NON	Total	*	Minus	**		=		X\$ 9	=		OR	X\$18=			
AME	Independent	•	Minus	***		=		X42=			OR	X84=			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140	_		OR	+280=			
1 12 14 20 22								TOT	ΓAL		OR	TOTAL			
(Column 1) (Column 2) (Column 3)									EE I		, • · · ·	ADDIT. FEE			
		CLAIMS		HIGH	IEST		ו ו		_	ADDI-	l	f	ADDI-		
AMENDMENT C		REMAINING AFTER AMENDMENT		PREV	IBER OUSLY FOR	PRESENT EXTRA		RATE	≣	TIONAL		RATE	TIONAL FEE		
	Total	*	Minus	**		-		X\$ 9	_		OR	X\$18=	, , , ,		
ME	Independent	*	Minus	***		=		X42=			OR	X84≖			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM														
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.											OR	+280=			
"* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."											OR	TOTAL ADDIT. FEE			
	The "Highest Nun	nber Previously Pa	id For" (Total o	r Independ	dent) is the	e highest numb	er fo	und in the	e api	propriate bo	x in co	olumo 1.			